

**Opening Statement**  
**Senator Chuck Grassley**  
**Chairman**  
**Senate Special Committee on Aging**  
**Hearing on the National Family Caregiver Support Program**  
**March 23, 1999**

As Chairman of the Special Committee on Aging, it is my pleasure to welcome my colleagues, our witnesses and the public to this important hearing. I especially want to extend my most sincere appreciation for those citizens who took the time and made the effort to participate in this hearing. A caregiver's time is extremely precious. I want to make sure your attendance at this hearing is of value to you.

The purpose of today's hearing is to evaluate part of a long-term care proposal made earlier this year by President Clinton. We are pleased to have Secretary Shalala hear today to present the National Family Caregiver Support Program. Senator Breaux and I look forward to promoting this measure in the Senate with a bill that we will introduce later today.

With millions of baby boomers set to retire in the near future, it is crucial to begin preparing today for what will be dramatically increased long-term care needs.

This initiative we're focused on today recognizes the most effective, and most under-appreciated, aspect of long-term care delivery: the family caregiver. Family caregivers face a chronic shortage of resources. Roughly 22 million Americans provide this sustenance and critical care to our nation's long-term care apparatus. Yet, in a sense, they themselves are malnourished. Caregivers are "starved" of resources that will support and help ease the overwhelming burden that they are expected to shoulder on a daily basis.

The goal of today's hearing is to examine the viability of a comprehensive, multifaceted support system in each state. The Family Caregiver Support Program would marshal resources into an "aging network" that would be constructed to support family caregivers in a variety of ways. This resource network would parallel other Title III Act programs. It would start with federal funding allocated to states on a population-based formula. Each state, in turn, would use its allocation to work with local area agencies on aging, community-service providers and consumer organizations. Ultimately, the program would serve millions of family caregivers in their own communities.

This program is ambitious in that it would endeavor to provide a very wide range of caregiver support services. The design is aimed at addressing the following challenges: How can the family caregivers receive the support that they need to continue to care for loved ones at home or in a community-based setting? Most people prefer to receive care in their homes, rather than in institutions. That's understandable. Few would question the preferences of those who would rather receive long-term care in a familiar, home-like setting. And, in addition to that, institutional care is more expensive.

We've learned a lot in recent years about the practical and substantial needs of family caregivers. We know that there are more than 20 million caregivers. The vast majority of them are women-- daughters, wives and sisters -- who, on top of caregiving, have jobs and children at home. The financial, work-related, personal and emotional demands are high. Nationwide surveys find that caregivers on average spend \$171 per month for food, medication, and other expenses related to caregiving. This amounts to \$2,000 a year. That's the equivalent of an IRA. Another survey of U.S. employers finds that a loss in

productivity from caregiving employees ranging from \$11 billion to \$29 billion a year. This comes in the form of adjustments to work schedules, including late arrivals and early departures, taking off extra time and leaves of absence.

On top of that, caregiving can take an enormous physical and emotional toll on the caregiver. As many as 30 percent of caregivers report to experiencing physical or mental health problems due to caregiving. So, while caregivers find their role rewarding, it also can be extremely stressful.

This proposal we'll talk about today is a modest investment. It is meant to target the acute needs of caregivers by providing services to connect families with information about local services and caregiver resources, and to make available counseling, training, and peer support. The Family Caregiver Support Program would be an important first step toward addressing these needs. I am glad for the opportunity today to highlight it.